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CONFIRMATION NO. 1420

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| SERIAL NUMBER 10/615,640 | FILING OR 371(c) DATE 07/08/2003 RULE | CLASS 705 | GROUP ART UNIT 3626 | ATTORNEY DOCKET NO. MERKN-001A |
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APPLICANTS

Richard Merkin, Reseda, CA;

** CONTINUING DATA *****

None SRP

** FOREIGN APPLICATIONS *****

None SRP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 10/03/2003

** SMALL ENTITY **

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|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 3 | TOTAL CLAIMS 28 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>SR</i> | | | | |

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TITLE

Health care administration method

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|---------------------------------------|---|---|
| FILING FEE RECEIVED 447 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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